CHRONIC DISEASES

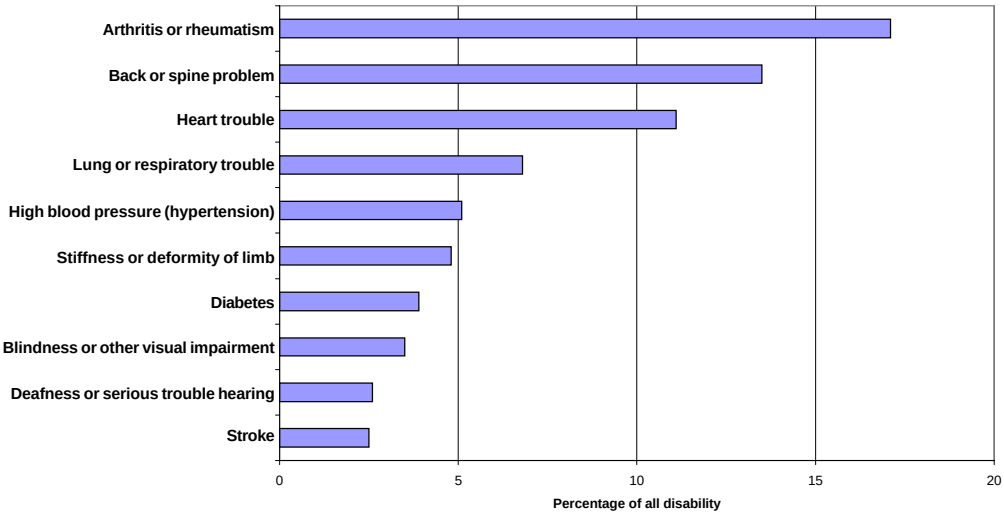
The Issue

The list of threats from chronic diseases -- long-term illness, disability, and decreased quality of life -- that affects Marylanders is long and ever-increasing. Diabetes, smoking-related illnesses, asthma, obesity, cardiovascular disease, and arthritis lead the list and contribute to a large financial burden for individuals, their families, and society.

Chronic diseases are among the most prevalent, costly, and preventable of all health problems. Seven out of every 10 Americans who die each year, more than 1.7 million people, die from a chronic disease. While older Americans are particularly at risk, chronic diseases also attack men and women in the prime of their lives. Additionally, most premature deaths among minority groups and the disadvantaged are due to chronic diseases. These conditions account for the largest part of the health gap between African-American and white Americans. Virtually every American family is adversely affected by some form of chronic disease, through long term illness, disability, decreased quality of life, and the large financial burden brought on by these diseases.

Chronic diseases rarely resolve without intervention. They usually are not cured by medication or treatment, and require lifelong monitoring and maintenance. However, damaging behaviors, directly and indirectly linked to many chronic diseases, can be changed. Prevention measures, the outcomes of both behavioral and clinical research, can be effectively applied to benefit individuals and their families.

Leading Causes of Disability Among Persons Aged 15 Years and Older, United States, 1991-1992,



Source: Centers for Disease Control and Prevention. (1994). "Prevalence of disability and associated health conditions–United States, 1991-1992." *Morbidity and Mortality Weekly Report, 43* (40), 730-731,737. Atlanta, GA.

The list of chronic diseases that affect Americans and Marylanders is long and ever-increasing. Diabetes, smoking related illnesses, asthma, obesity, cardiovascular diseases, and arthritis all contribute to increased individual and societal burden.

Topics, by jurisdiction, included in the Health Improvement Plan

Statewide - *Arthritis*
Howard County - *Preventing Diabetes and its Complications*

Priority focus in other jurisdictions

Chronic disease is also identified as a priority area for FY2000 in:
Allegany County • Calvert County • Carroll County • Cecil County • Charles County
Dorchester County • Frederick County • Harford County • Montgomery County
Washington County • Wicomico County • Worcester County

Highlights of HIP strategies recommended to decrease chronic disease
(*for in-depth details, see the complete text of each state and county module in the HIP)*

- Develop a state arthritis action plan to promote public awareness of the disease, early diagnosis and appropriate self management, and development of medical continuing education programs for health care providers. (**State**)
- Build capacity within the Department of Health and Mental Hygiene to deal with the awareness of arthritis and related conditions. (**State**)
- Develop tools to allow effective assessment and monitoring of provider care and patient compliance of diabetes. (**Howard County**)
- Initiate a public campaign to educate the adult population about the seriousness, costs, and risk factors associated with diabetes. (**Howard County**)

Statewide Partners

Arthritis Foundation of Maryland • Delmarva Foundation for Medical Care • Delmarva Orthopaedic Clinic • Governor's Council on Physical Fitness • Johns Hopkins University School of Medicine • Lupus Foundation of Maryland • Maryland Department on Aging • Maryland Health Care Commission • Maryland Medical Assistance Administration, DHMH • Maryland Society for Rheumatic Diseases • Maryland State Advisory Council on Arthritis • Maryland State Osteoporosis Task Force • Med Chi–the Maryland State Medical Society • Office of Health Promotion, Education, and Tobacco Use Prevention, DHMH • University of Maryland, Baltimore County